

Democrat

Vote **BOLD!**

 **Bothwell** for US Congress

NC 11th Congressional District • POB 1877 • Asheville, NC 28802 • 828.209.8806 • bothwell2012.com

RECEIVED
2012 MAY 29 AM 11:39
FEC MAIL CENTER

Federal Election Commission
Washington, DC 20463

Att: Reports Analysis Division


Attached please find a revised Schedule B, for my campaign's year end report, as requested in your attached letter.

Also, a revised Schedule B for my first quarter, 2012, since I anticipate that I probably made the same mistakes again, before you sent the warning about the previous filing.

My surmise is that you only need Schedule B, since there are no dollar figure changes in the original report.

Please advise if you want the whole report submitted again.

Best regards,



Cecil Bothwell

12030814597



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

April 25, 2012

CECIL BOTHWELL, TREASURER
BOTHWELL FOR CONGRESS
POB 1877
ASHEVILLE, NC 28802

Response Due Date

05/30/2012

IDENTIFICATION NUMBER: C00496190

REFERENCE: YEAR-END REPORT (10/01/2011 - 12/31/2011)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 3 item(s):

1. On Schedule B supporting Line 17 of your report, you have itemized disbursements for which you have failed to include the date, address, and/or purpose. Please amend your report to include the missing information. (11 CFR § 104.3(b)(4))
2. Schedule B supporting Line 17 of your report discloses reimbursements to individuals for expenses other than travel and subsistence. Please be advised that when itemizing reimbursements to individuals for goods or services, if the payment to the original vendor aggregates in excess of \$200 in an election cycle, a memo entry including the name and address of the original vendor, as well as the date, amount and purpose of the original purchase must be provided. Please amend your report to include the missing information or provide clarifying information if memo items are not required. (11 CFR §§ 104.3(b)(4)(i) and 104.9, and Advisory Opinions 1992-1 and 1996-20)
3. Itemized disbursements must include a brief statement or description of why each disbursement was made. Please amend Schedule B supporting Line 17 of your report to clarify the following description(s): "Contract." For further guidance regarding acceptable purposes of disbursement, please refer to 11 CFR 104.3(b)(4)(i)(A).

Additional clarification regarding inadequate purposes of disbursement published in the Federal Register can be found at <http://www.fec.gov/law/>

12030814598

BOTHWELL FOR CONGRESS

Page 2 of 2

policy/purposeofdisbursement/inadequate_purpose_list_3507.pdf.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. Requests for extensions of time in which to respond will not be considered.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended.

If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1132.

Sincerely,



Chris Jones
Senior Campaign Finance Analyst
Reports Analysis Division

12030814599

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. Brown, Linda

Date of Disbursement

10 / 01 / 2011

Mailing Address

35 Grove St. #207

City

Asheville

State

NC

Zip Code

28801

Amount of Each Disbursement this Period

1,100.00

Purpose of Disbursement

contract

001

Candidate Name

Bothwell

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Tata, Raven

Date of Disbursement

10 / 01 / 2011

Mailing Address

501 Trotting Ln

City

Green Mt. NC

State

Zip Code

28740

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement

contract

001

Candidate Name

Bothwell

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Ramada Inn

Date of Disbursement

10 / 01 / 2011

Mailing Address

800 Fairview Rd.

City

Asheville

State

NC

Zip Code

28803

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement

room rent

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

1,475.00

TOTAL This Period (last page this line number only).....

12030814601

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. **Frank's Roman Pizza**

Date of Disbursement

Mailing Address
90 S. Tunnel Rd.

10 / 01 / 2011

City **Asheville** State **NC** Zip Code **28803**

Amount of Each Disbursement this Period

Purpose of Disbursement
Volunteer food

001
Category/
Type

73.39

Candidate Name
Bothwell

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. **Washington Hilton**

Date of Disbursement

Mailing Address
1919 Connecticut Ave NW

10 / 03 / 2011

City **Washington** State **DC** Zip Code **20009**

Amount of Each Disbursement this Period

Purpose of Disbursement
candidate meal

002
Category/
Type

67.00

Candidate Name
Bothwell

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. **Asheville Regional Airport**

Date of Disbursement

Mailing Address
168 Wright Brothers way

10 / 05 / 2011

City **Fletcher** State **NC** Zip Code **28732**

Amount of Each Disbursement this Period

Purpose of Disbursement
parking fee

002
Category/
Type

21.00

Candidate Name
Bothwell

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

161.39

TOTAL This Period (last page this line number only).....

12030814602

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Citgo		Date of Disbursement M M / D D / Y Y Y Y 10 08 2011
Mailing Address 425 Broadway		Amount of Each Disbursement this Period 27.50
City Asheville	State NC	
Zip Code 28801		Category/ Type 002
Purpose of Disbursement candidate travel		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Allison Outdoor		Date of Disbursement M M / D D / Y Y Y Y 10 12 2011
Mailing Address POB 120		Amount of Each Disbursement this Period 660.00
City Sylva	State NC	
Zip Code 28779		Category/ Type 004
Purpose of Disbursement Billboard ad		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Club Flyers		Date of Disbursement M M / D D / Y Y Y Y 10 13 2011
Mailing Address 2300 NW 7th Ave		Amount of Each Disbursement this Period 56.52
City Miami	State FL	
Zip Code 33127		Category/ Type 004
Purpose of Disbursement print		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	744.02
TOTAL This Period (last page this line number only).....	

12030814603

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>4</u> OF <u>22</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement M M ' D D ' Y Y Y Y 10 ' 13 ' 20 11
Mailing Address Downtown Station		Amount of Each Disbursement this Period 7.23
City Asheville	State NC	
Zip Code 28802		
Purpose of Disbursement postage	Category/Type 001	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grove Arcade Copy Shop		Date of Disbursement M M ' D D ' Y Y Y Y 10 ' 13 ' 20 11
Mailing Address 10 O'Henry St.		Amount of Each Disbursement this Period 1334
City Asheville	State NC	
Zip Code 28801		
Purpose of Disbursement copies	Category/Type 001	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Associated Posters		Date of Disbursement M M ' D D ' Y Y Y Y 10 ' 17 ' 20 11
Mailing Address POB 255		Amount of Each Disbursement this Period 126.23
City Winston-Salem	State NC	
Zip Code 27102		
Purpose of Disbursement banner	Category/Type 004	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	146.90
TOTAL This Period (last page this line number only).....	

12030814604

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Citgo		Date of Disbursement M M ' D D ' Y Y Y Y 10 19 20 11
Mailing Address 425 Broadway		Amount of Each Disbursement this Period 27.22
City Asheville	State NC	
Zip Code 28801		Amount of Each Disbursement this Period 179.34
Purpose of Disbursement candidate travel	Category/Type 002	
Candidate Name Bothwell		Amount of Each Disbursement this Period 74.17
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) B. Gentleman's Gallery		Date of Disbursement M M ' D D ' Y Y Y Y 10 20 20 11
Mailing Address 60 Haywood St		Amount of Each Disbursement this Period 280.73
City Asheville	State NC	
Zip Code 28801		Amount of Each Disbursement this Period 280.73
Purpose of Disbursement candidate attire	Category/Type 001	
Candidate Name Bothwell		Amount of Each Disbursement this Period 280.73
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) C. Staples Office Supply		Date of Disbursement M M ' D D ' Y Y Y Y 10 20 20 11
Mailing Address 65 Merrimon Ave		Amount of Each Disbursement this Period 280.73
City Asheville	State NC	
Zip Code 28801		Amount of Each Disbursement this Period 280.73
Purpose of Disbursement print cartridges, paper	Category/Type 001	
Candidate Name Bothwell		Amount of Each Disbursement this Period 280.73
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
SUBTOTAL of Disbursements This Page (optional).....		280.73
TOTAL This Period (last page this line number only).....		

12036814603

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 22

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. **Foam + Fabrics**

Date of Disbursement

Mailing Address
175 Biltmore Ave

10/21/2011

City **Asheville** State **NC** Zip Code **28801**

Amount of Each Disbursement this Period

Purpose of Disbursement
table cloth

11.99

Candidate Name
Bothwell Category/Type **001**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. **Brown, Linda**

Date of Disbursement

Mailing Address
35 Grove St. # 207

10/22/2011

City **Asheville** State **NC** Zip Code **28801**

Amount of Each Disbursement this Period

Purpose of Disbursement
reimburse office supply

170.30

Candidate Name
Bothwell Category/Type **001**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. **Skinny Legs + AU**

Date of Disbursement

Mailing Address
c/o 222 Asheland Ave

10/23/2011

City **Asheville** State **NC** Zip Code **28801**

Amount of Each Disbursement this Period

Purpose of Disbursement
music - kick off party

600.00

Candidate Name
Bothwell Category/Type **001**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... **782.29**

TOTAL This Period (last page this line number only).....

12030814606

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Brodsky, Chuck		Date of Disbursement 10 / 23 / 20 11
Mailing Address POB 16009		Amount of Each Disbursement this Period 300.00
City Asheville	State NC	
Zip Code 28816		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement music - kick-off party	Category/Type 001	
Candidate Name Bothwell		Amount of Each Disbursement this Period 5.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) B. Rovier, David		Date of Disbursement 10 / 23 / 20 11
Mailing Address POB 86805		Amount of Each Disbursement this Period 500.00
City Portland	State OR	
Zip Code 97286		Amount of Each Disbursement this Period 5.00
Purpose of Disbursement music - kick-off party	Category/Type 001	
Candidate Name Bothwell		Amount of Each Disbursement this Period 5.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) C. Grove Park Inn		Date of Disbursement 10 / 22 / 20 11
Mailing Address 290 Macon Ave		Amount of Each Disbursement this Period 5.00
City Asheville	State NC	
Zip Code 28804		Amount of Each Disbursement this Period 5.00
Purpose of Disbursement parking fee	Category/Type 002	
Candidate Name Bothwell		Amount of Each Disbursement this Period 5.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	805.00
TOTAL This Period (last page this line number only).....	

12030814607

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 22

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (in Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Grove Park Inn		Date of Disbursement 10 / 22 / 2011
Mailing Address 290 Macon Ave		Amount of Each Disbursement this Period 7.00
City Asheville	State NC	
Zip Code 28804		002 Category/ Type
Purpose of Disbursement parking fee		
Candidate Name Bothwell		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. Charm's Floral		Date of Disbursement 10 / 23 / 2011
Mailing Address 163 Beaverdam Rd.		Amount of Each Disbursement this Period 300.00
City Asheville	State NC	
Zip Code 28804		007 Category/ Type
Purpose of Disbursement flower arrangements / event		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) C. Cook, Chelsea		Date of Disbursement 10 / 23 / 2011
Mailing Address 600 Bulldog Dr. #1700 Apt 303		Amount of Each Disbursement this Period 400.00
City Asheville	State NC	
Zip Code 28801		001 Category/ Type
Purpose of Disbursement contract		
Candidate Name Bothwell		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	707.00
TOTAL This Period (last page this line number only).....	

12030814608

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Citgo Broadway		Date of Disbursement 10 26 2011
Mailing Address 425 Broadway		
City Asheville	State NC	Zip Code 28801
Purpose of Disbursement candidate travel	Category/ Type 002	Amount of Each Disbursement this Period 22.30
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		
Full Name (Last, First, Middle Initial) B. Citgo Broadway		Date of Disbursement 11 02 2011
Mailing Address 425 Broadway		
City Asheville	State NC	Zip Code 28801
Purpose of Disbursement candidate travel	Category/ Type 002	Amount of Each Disbursement this Period 23.48
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		
Full Name (Last, First, Middle Initial) C. Waynesville / city of		Date of Disbursement 11 02 2011
Mailing Address 16 S. Main St.		
City Waynesville	State NC	Zip Code 28786
Purpose of Disbursement parade fee	Category/ Type 007	Amount of Each Disbursement this Period 15.00
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... 60.78

TOTAL This Period (last page this line number only).....

12030814609

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Tata, Raven		Date of Disbursement 11 02 2011
Mailing Address 501 Trotting Ln		Amount of Each Disbursement this Period 250.00
City Green Mt	State NC	
Zip Code 28740		Category/ Type 001
Purpose of Disbursement contract, mgmt.		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
Full Name (Last, First, Middle Initial) B. Brown, Linda		Date of Disbursement 11 02 2011
Mailing Address 35 Grove St #207		Amount of Each Disbursement this Period 1,100.00
City Asheville	State NC	
Zip Code 28801		Category/ Type 001
Purpose of Disbursement contract, mgmt.		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
Full Name (Last, First, Middle Initial) C. Cook, Chelsea		Date of Disbursement 11 03 2011
Mailing Address 600 Bulldog Dr. #1700 Apt. 303		Amount of Each Disbursement this Period 200.00
City Asheville	State NC	
Zip Code 28801		Category/ Type 001
Purpose of Disbursement contract, campaign mgmt.		
Candidate Name Bothwell		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1,550.--
TOTAL This Period (last page this line number only).....	

12030814610

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. **Allison Outdoor**

Date of Disbursement

11 / 08 / 2011

Mailing Address

P.O. Box 120

City

Sylva

State

NC

Zip Code

28779

Amount of Each Disbursement this Period

359.38

Purpose of Disbursement

billboard

004

Candidate Name

Bothwell

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. **Citygo**

Date of Disbursement

11 / 05 / 2011

Mailing Address

425 Broadway

City

Ashville

State

NC

Zip Code

28801

Amount of Each Disbursement this Period

24.20

Purpose of Disbursement

candidate travel

002

Candidate Name

Bothwell

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. **Cornerstone Restaurant**

Date of Disbursement

11 / 16 / 2011

Mailing Address

102 Tunnel Rd.

City

Ashville

State

NC

Zip Code

28803

Amount of Each Disbursement this Period

10.65

Purpose of Disbursement

Dem meeting breakfast

001

Candidate Name

Bothwell

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional)

394.73

TOTAL This Period (last page this line number only)

12030814611

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>2</u> OF <u>22</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Citgo		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address 725 Broadway		Amount of Each Disbursement this Period , 25.43	
City Asheville	State NC		Zip Code 28801
Purpose of Disbursement candidate travel			Category/ Type 002
Candidate Name Bothwell			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. McDonald's		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address 39 Skyland Dr.		Amount of Each Disbursement this Period , 5.85	
City Sylva	State NC		Zip Code 28779
Purpose of Disbursement candidate mail/travel			Category/ Type 002
Candidate Name Bothwell			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Zazzle		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address 1185 Campbell Ave.		Amount of Each Disbursement this Period , 229.99	
City San Jose	State CA		Zip Code 95126
Purpose of Disbursement stickers - parade favors			Category/ Type 001
Candidate Name Bothwell			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	, 261.27
TOTAL This Period (last page this line number only).....	

12030814612

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 OF 22
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. <u>Celgo</u>		M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address <u>425 Broadway</u>		Amount of Each Disbursement this Period 2622
City <u>Asheville</u>	State <u>NC</u> Zip Code <u>28801</u>	
Purpose of Disbursement <u>candidate travel</u>		Category/ Type <u>002</u>
Candidate Name <u>Bothwell</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial)		Date of Disbursement
B. <u>Brown, Linda</u>		M M / D D / Y Y Y Y
Mailing Address <u>35 Grove St. #207</u>		Amount of Each Disbursement this Period 1,100.00
City <u>Asheville</u>	State <u>NC</u> Zip Code <u>28801</u>	
Purpose of Disbursement <u>contract, campaign mgmt.</u>		Category/ Type <u>001</u>
Candidate Name <u>Bothwell</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial)		Date of Disbursement
C. <u>Eastvale Shopping Center</u>		M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address <u>271 Tunnel Rd.</u>		Amount of Each Disbursement this Period 250.00
City <u>Asheville</u>	State <u>NC</u> Zip Code <u>28803</u>	
Purpose of Disbursement <u>rent - office</u>		Category/ Type <u>001</u>
Candidate Name <u>Bothwell</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1,376.22
TOTAL This Period (last page this line number only).....	

12030814613

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 22

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. **McKenney Insurance**

Date of Disbursement

Mailing Address
5 Allen Ave

12 / 01 / 20 11

City **Ashville** State **NC** Zip Code **28803**

Amount of Each Disbursement this Period

Purpose of Disbursement
general liability policy **001**

225.00

Candidate Name
Bothwell Category/Type

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President

State: District:

Full Name (Last, First, Middle Initial)

B. **Leonard, Angela**

Date of Disbursement

Mailing Address
47 Sam's Rd.

12 / 04 / 20 11

City **Weaverly** State **NC** Zip Code **28787**

Amount of Each Disbursement this Period

Purpose of Disbursement
reimburse furniture cost **001**

35.00

Candidate Name
Bothwell Category/Type

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President

State: District:

Full Name (Last, First, Middle Initial)

C. **Stewart Sound**

Date of Disbursement

Mailing Address
37 Teague Dr

12 / 05 / 20 11

City **Leicester** State **NC** Zip Code **28748**

Amount of Each Disbursement this Period

Purpose of Disbursement
equip. rental **007**

125.00

Candidate Name
Bothwell Category/Type

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President

State: District:

SUBTOTAL of Disbursements This Page (optional).....

385.00

TOTAL This Period (last page this line number only).....

12030814614

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Aldridge, Drayton		Date of Disbursement 12 05 2011
Mailing Address 166 Hillside St.		Amount of Each Disbursement this Period 50.00
City Asheville	State NC Zip Code 28801	
Purpose of Disbursement musician	Category/Type 007	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) B. Piceola, Mario		Date of Disbursement 12 05 2011
Mailing Address 166 Hillside St.		Amount of Each Disbursement this Period 50.00
City Asheville	State NC Zip Code 28801	
Purpose of Disbursement musician	Category/Type 007	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) c. Norton, Luke		Date of Disbursement 12 05 2011
Mailing Address 166 Hillside St		Amount of Each Disbursement this Period 50.00
City Asheville	State NC Zip Code 28801	
Purpose of Disbursement musician	Category/Type 007	
Candidate Name Bothwell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... **150.00**

TOTAL This Period (last page this line number only).....

12030814615

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Hervin, John Mark		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address 166 Hillside St.		
City Asheville	State NC	Zip Code 28801
Purpose of Disbursement musician	Category/ Type 001	Amount of Each Disbursement this Period 50.00
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	
Full Name (Last, First, Middle Initial) B. Tata, Raven		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address 501 Trotting Ln		12 / 06 / 2011
City Green Mt.	State NC	Zip Code 28740
Purpose of Disbursement contract, campaign mgmt.	Category/ Type 001	Amount of Each Disbursement this Period 250.00
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	
Full Name (Last, First, Middle Initial) C. Citgo		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address 425 Broadway		12 / 07 / 2011
City Asheville	State NC	Zip Code 28801
Purpose of Disbursement candidate travel	Category/ Type 002	Amount of Each Disbursement this Period 23.68
Candidate Name Bothwell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	
SUBTOTAL of Disbursements This Page (optional).....		323.68
TOTAL This Period (last page this line number only).....		

12030814616

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Allison Outdoor		Date of Disbursement M M / D D / Y Y Y Y 12 07 20 11
Mailing Address POB 120		Amount of Each Disbursement this Period , 660.00
City Sylva	State NC	
Zip Code 28779		Amount of Each Disbursement this Period , 660.00
Purpose of Disbursement bill board	Category/Type 004	
Candidate Name Bothwell		Amount of Each Disbursement this Period , 660.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. City of Asheville		Date of Disbursement M M / D D / Y Y Y Y 12 08 20 11
Mailing Address 70 Court Plaza		Amount of Each Disbursement this Period , 26.00
City Asheville	State NC	
Zip Code 28801		Amount of Each Disbursement this Period , 26.00
Purpose of Disbursement sign permit	Category/Type 001	
Candidate Name Bothwell		Amount of Each Disbursement this Period , 26.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Transylvania Public Library		Date of Disbursement M M / D D / Y Y Y Y 12 13 20 11
Mailing Address 212 S. Gaston St.		Amount of Each Disbursement this Period , 60.00
City Brevard	State NC	
Zip Code 28712		Amount of Each Disbursement this Period , 60.00
Purpose of Disbursement room rent	Category/Type 007	
Candidate Name Bothwell		Amount of Each Disbursement this Period , 60.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	, 746.00
TOTAL This Period (last page this line number only).....	

12030814617

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

Full Name (Last, First, Middle Initial) A. Hankins, Brad		Date of Disbursement 12 15 2011
Mailing Address 1185 W. Mountain View Rd. #2328		Amount of Each Disbursement this Period 185.84
City Johnson City TN	State TN	
Zip Code 37604		Category/Type 004
Purpose of Disbursement reimburse printing		
Candidate Name Bothwell		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. Taco Bell		Date of Disbursement 12 16 2011
Mailing Address 67 Tunnel Rd.		Amount of Each Disbursement this Period 11.47
City Asheville NC	State NC	
Zip Code 28803		Category/Type 001
Purpose of Disbursement video crew lunch		
Candidate Name Bothwell		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) C. Citgo		Date of Disbursement 12 12 2011
Mailing Address 425 Broadway		Amount of Each Disbursement this Period 25.00
City Asheville NC	State NC	
Zip Code 28801		Category/Type 002
Purpose of Disbursement candidate travel		
Candidate Name Bothwell		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	222.31
TOTAL This Period (last page this line number only).....	

12030814618

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 22

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. Grove Arcade Copy Shop

Date of Disbursement

11 ' 08 ' 2011

Mailing Address

10 O'Henry St

City

Asterville

State

NC

Zip Code

28801

Amount of Each Disbursement this Period

128.10

Purpose of Disbursement

copies

001
Category/
Type

Candidate Name

Bothwell

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Sarzynski, Brian

Date of Disbursement

12 ' 18 ' 2011

Mailing Address

54 Fulton St.

City

Asterville

State

NC

Zip Code

28801

Amount of Each Disbursement this Period

130.00

Purpose of Disbursement

video work

004
Category/
Type

Candidate Name

Bothwell

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Charm's Floral

Date of Disbursement

12 ' 18 ' 2011

Mailing Address

163 Beaverdam Rd.

City

Asterville

State

NC

Zip Code

28804

Amount of Each Disbursement this Period

55.00

Purpose of Disbursement

decorations - grand opening

001
Category/
Type

Candidate Name

Bothwell

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

313.10

TOTAL This Period (last page this line number only).....

12030814619

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **20** OF **22**

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Bothwell for Congress

A. Full Name (Last, First, Middle Initial) **Cetgo** Date of Disbursement **12/19/2011**

Mailing Address **425 Broadway**

City **Asterville** State **NC** Zip Code **28801** Amount of Each Disbursement this Period **25.50**

Purpose of Disbursement **candidate travel** Category/Type **002**

Candidate Name **Bothwell**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: District:

B. Full Name (Last, First, Middle Initial) **Leonard, Angela** Date of Disbursement **12/13/2011**

Mailing Address **47 Sam's Rd.**

City **Weaverville** State **NC** Zip Code **28787** Amount of Each Disbursement this Period **34.00**

Purpose of Disbursement **reimburse - parade expense** Category/Type **007**

Candidate Name **Bothwell**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: District:

C. Full Name (Last, First, Middle Initial) **Leonard, Angela** Date of Disbursement **12/13/2011**

Mailing Address **47 Sam's Rd.**

City **Weaverville** State **NC** Zip Code **28787** Amount of Each Disbursement this Period **250.00**

Purpose of Disbursement **contract, office mgr.** Category/Type **007**

Candidate Name **Bothwell**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: District:

SUBTOTAL of Disbursements This Page (optional) **309.50**

TOTAL This Period (last page this line number only)

12030814620

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **21** OF **22**

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S. California Ave.

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement ad. Category/Type 004

Candidate Name Bothwell

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

12/26/2011

Amount of Each Disbursement this Period

1.51

Full Name (Last, First, Middle Initial)

B. Club Flyers

Mailing Address 2300 NW 7th Ave

City Miami State FL Zip Code 33127

Purpose of Disbursement print cards Category/Type 004

Candidate Name Bothwell

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

12/31/2011

Amount of Each Disbursement this Period

95.83

Full Name (Last, First, Middle Initial)

C. Brown, Linda

Mailing Address 35 Grove St. #207

City Asheville State NC Zip Code 28801

Purpose of Disbursement contract; campaign mgmt. Category/Type 001

Candidate Name Bothwell

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

12/31/2011

Amount of Each Disbursement this Period

1100.00

SUBTOTAL of Disbursements This Page (optional).....

1,197.34

TOTAL This Period (last page this line number only).....

12030814621

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Bothwell for Congress

Full Name (Last, First, Middle Initial)

A. Tata, Raven
 Mailing Address 501 Trotting Ln.
 City Green Mt. State NC Zip Code 28740
 Purpose of Disbursement contract, campaign mgmt. Category/Type 001
 Candidate Name Bothwell
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y
12 31 2011
 Amount of Each Disbursement this Period
, 250.00

Full Name (Last, First, Middle Initial)

B. Facebook
 Mailing Address 1601 S. California Ave
 City Palo Alto State CA Zip Code 94304
 Purpose of Disbursement ads Category/Type 004
 Candidate Name Bothwell
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y
12 31 2011
 Amount of Each Disbursement this Period
, 15.66

Full Name (Last, First, Middle Initial)

C.
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Purpose of Disbursement _____
 Candidate Name _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y

 Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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PREPARER
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